

19-10926-tmd Doc#159 Filed 11/01/19 Entered 11/01/19 15:00:14 Main Document Pg 1 of 1

AO 159 (Rev. 04/18)

ADMINISTRATIVE OFFICE OF THE UNITED STATES COURTS

FOR COURT USE ONLY

1

TRANSCRIPT ORDER

DUE DATE:

Please Read Instructions:

1. NAME Shelby Jordan		2. PHONE NUMBER 361-884-5678		3. DATE 11/01/2019	
4. DELIVERY ADDRESS OR EMAIL ecf@jhwclaw.com		5. CITY Corpus Christi		6. STATE Texas	7. ZIP CODE 78401
8. CASE NUMBER 19-10926	9. JUDGE Davos	DATES OF PROCEEDINGS			
		10. FROM 10/31/2019		11. TO 10/31/2019	
12. CASE NAME Orly Genger		LOCATION OF PROCEEDINGS			
		13. CITY Austin		14. STATE Texas	
15. ORDER FOR					
<input type="checkbox"/> APPEAL		<input type="checkbox"/> CRIMINAL		<input type="checkbox"/> CRIMINAL JUSTICE ACT	
<input type="checkbox"/> NON-APPEAL		<input type="checkbox"/> CIVIL		<input checked="" type="checkbox"/> BANKRUPTCY	
		<input type="checkbox"/> IN FORMA PAUPERIS		<input type="checkbox"/> OTHER	
16. TRANSCRIPT REQUESTED (Specify portion(s) and date(s) of proceeding(s) for which transcript is requested)					
PORTIONS		DATE(S)		PORTION(S)	
<input type="checkbox"/> VOIR DIRE				<input checked="" type="checkbox"/> TESTIMONY (Specify Witness)	
<input type="checkbox"/> OPENING STATEMENT (Plaintiff)					
<input type="checkbox"/> OPENING STATEMENT (Defendant)					
<input type="checkbox"/> CLOSING ARGUMENT (Plaintiff)				<input type="checkbox"/> PRE-TRIAL PROCEEDING (Specy)	
<input type="checkbox"/> CLOSING ARGUMENT (Defendant)					
<input type="checkbox"/> OPINION OF COURT					
<input type="checkbox"/> JURY INSTRUCTIONS				<input type="checkbox"/> OTHER (Specify)	
<input type="checkbox"/> SENTENCING					
<input type="checkbox"/> BAIL HEARING					
17. ORDER					
CATEGORY	ORIGINAL (Includes Certified Copy to Clerk for Records of the Court)	FIRST COPY	ADDITIONAL COPIES	NO. OF PAGES ESTIMATE	
ORDINARY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
14-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
EXPEDITED	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
3-Day	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
DAILY	<input checked="" type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
HOURLY	<input type="checkbox"/>	<input type="checkbox"/>	NO. OF COPIES		
REALTIME	<input type="checkbox"/>	<input type="checkbox"/>			
CERTIFICATION (18. & 19.) By signing below, I certify that I will pay all charges (deposit plus additional).				ESTIMATE TOTAL	
18. SIGNATURE /s/ Shelby Jordan				PROCESSED BY Blayne Turner	
19. DATE 11/01/2019				PHONE NUMBER 512-916-5237	
TRANSCRIPT TO BE PREPARED BY Exceptional Reporting				COURT ADDRESS 903 San Jacinto Blvd Austin, TX 78701	
ORDER RECEIVED	DATE	BY			
DEPOSIT PAID			DEPOSIT PAID		
TRANSCRIPT ORDERED			TOTAL CHARGES	0	
TRANSCRIPT RECEIVED			LESS DEPOSIT	0	
ORDERING PARTY NOTIFIED TO PICK UP TRANSCRIPT			TOTAL REFUNDED		
PARTY RECEIVED TRANSCRIPT			TOTAL DUE	0	

DISTRIBUTION:

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TRANSCRIPTION COPY

ORDER RECEIPT

ORDER COPY

FILED
 2019 NOV -4 PM 12:30
 U.S. BANKRUPTCY COURT
 BY [Signature]
 CLERK